

☐ Local Building Department

INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICES SECTION

302 West Washington Street, Room W246 indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp_bs_comm_code/



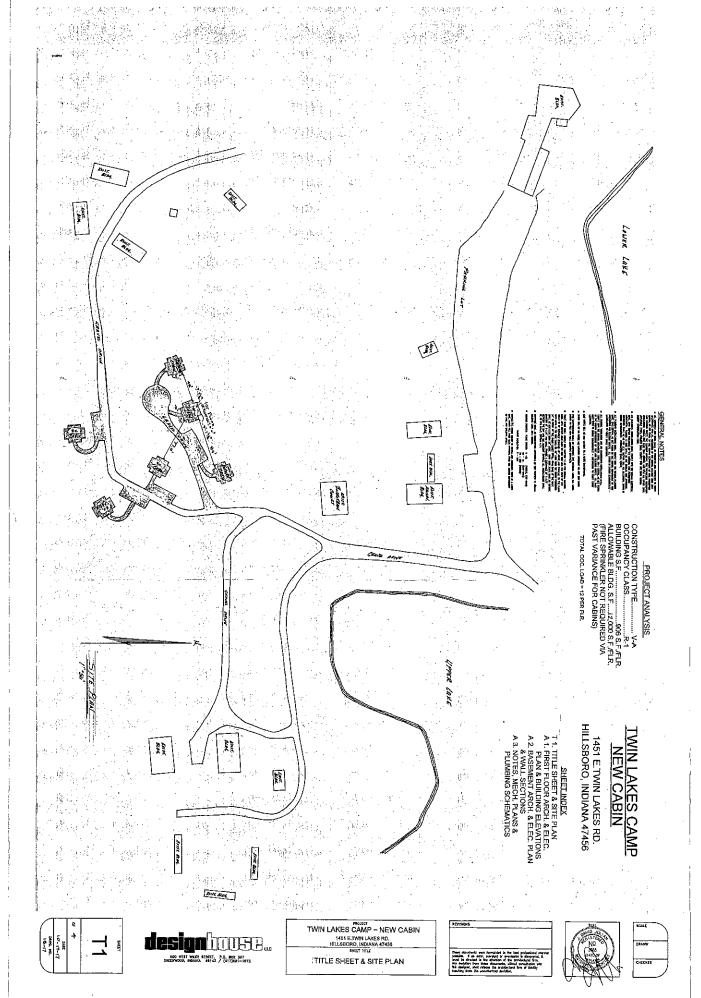
Variance number (Assigned by department) INSTRUCTIONS: Please refer to the attached four (4) page instructions. Attach additional pages as needed to complete this application. 18-03-05 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of applicant Chief Executive Officer Jon Beight Telephone number Name of organization Indiana Regular Baptist Youth Camp, Inc. (765) 798-4000 Address (number and street, city, state, and ZIP code) 1451 E. Twin Lakes Rd., Hillsboro, IN 47949 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by the applicant) Name of applicant Attorney Philip R. Zimmerly, Esq. Telephone number Name of organization (317) 684-5116 Bose McKinney & Evans LLP Address (number and street, city, state, and ZIP code) 111 Monument Circle, Suite 2700, Indianapolis, IN 46204 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number AR00033665 J. David Julian, R.A. Telephone number Name of organization (317) 881-1072 DesignHouse Address (number and street, city, state, and ZIP code) PO Box 307, Greenwood, IN 46142 4. PROJECT IDENTIFICATION State project number County Name of project 395860 Fountain Twin Lakes Camp Elm Cabin Address of site (number and street, city, state, and ZIP code) 1451 E. Twin Lakes Rd., Hillsboro, IN 46949 Type of project New ☐ Addition ☐ Alteration ☐ Change of occupancy Existing 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire and Bullding Safety issued a Correction Order? ☐ Yes (If yes, attach a copy of the Correction Order.) ⊠ No Has a violation been issued? ⊠ No ☐ Yes (If yes, attach a copy of the Violation and answer the following.) Violation issued by:

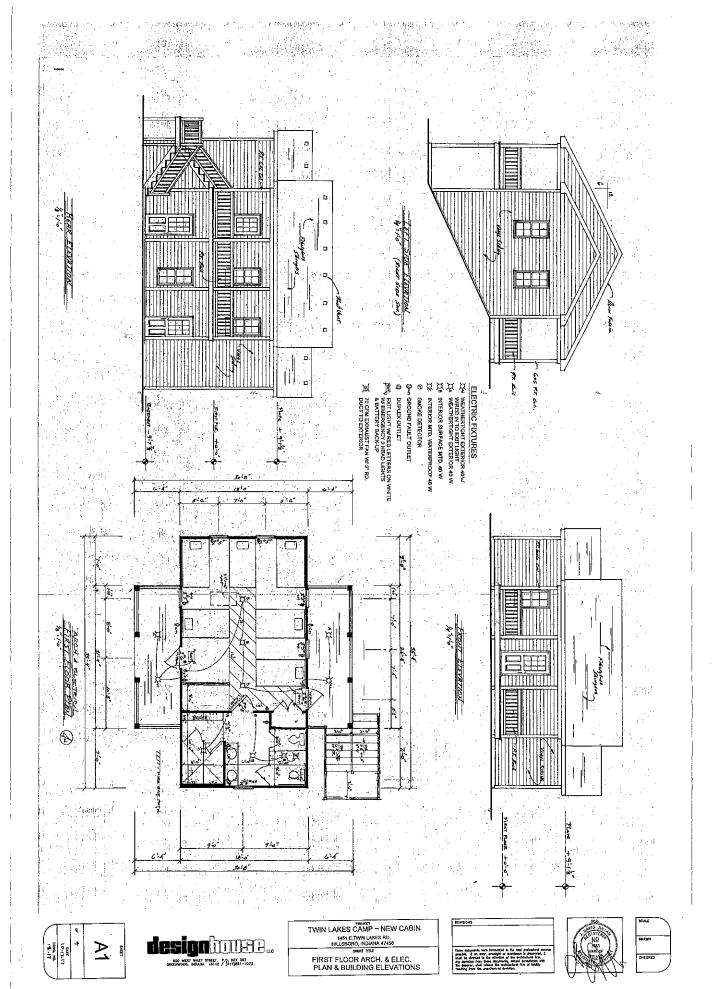
Local Fire Department

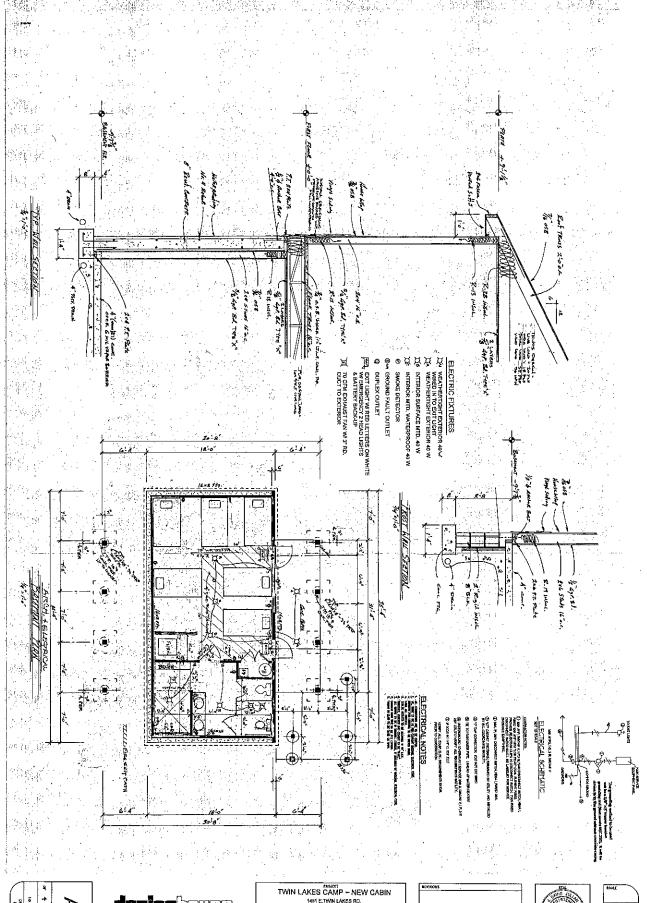
☐ State Fire and Building Code Enforcement Section

DESCRIPTION OF REQUESTED VARIANCE Name of code or standard and edition involved	Specific code section				
Indiana Building Code (675 IAC 13-2.6-1)		ode (2012 ed))			
Indiana Building Code (675 IAC 13-2.6-1) Section 903.2.8 (Int'l Building Code (2012 ed.)) Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) Applicant requests that it be relieved from requirement to install sprinkler system for a Group R occupancy. Per the attached design plan, the cabin at issue is to primarily consist of one small sleeping room (900 sq. ft) per level, with immediate access to the outside via two separate exits per room. There are no long flights of stairs or hallways to have immediate egress of the building. This facility does not have a kitchen, and is used as a sleeping quarter only. Smoke detectors will be installed and will give earlier and sufficient notice of any fire. Additionally, a one-hour fire rated assembly of 3/4" gypcrete is to be installed on top of the subfloor and a layer of 5/8" Type X drywall under the floor joists is to be provided between the two floors. Applicant received a variance for an identical cabin on May 24, 2013 (Project No. 362553) (Variance No. 13-04-15) under these conditions, a true and accurate copy of which is attached to this application.					
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND W Select one of the following statements:	ELFARE WILL BE PROTECTED				
Non-compliance with the rule will not be adverse to the public l	nealth, safety or welfare; or				
Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific).					
Facts demonstrating that the above selected statement is true: As referenced above, applicant received a variance for an identical cabin on May 24, 2013 (Project No. 362553) (Variance No. 13-04-15). Per the attached design plan, this building has primarily one small sleeping room (900 sq. ft) per level, with immediate access to the outside via two separate exits on each level. There are no long flights of stairs or hallways to contend with to have immediate egress of the building. According to the CDC website, most victims of fires die from smoks or toxic gases and not from burns (Hall 2001). The required smoke detectors will give earlier and sufficient notice of a fire due to the easy exits mentioned above. Further, smoking is the leading cause of fire-related deaths, and the camp is a smoke free facility (Ahrens 2011). Lastly, cooking is the primary cause of residential fires (Ahrens 2011). These facilities do not have kitchens, and are sleeping quarters only. Taking into account that the occupants of this building fall outside the populations most at risk (children 4 and under and older adults [CDC 2010, Flynn 2010]), and that these summer cabins fall outside the greatest risks factors (no smoke alarms (Ahrens 2011), winter months (CDC 1998, Flynn 2010), Alcohol use (Smith 1999)), public health and safety will be retained.					
Select at least one of the following statements:					
Imposition of the rule would result in an undue hardship (unusual					
Imposition of the rule would result in an undue hardship (unusua)					
Imposition of the rule would result in an undue hardship (unusual					
Imposition of the rule would prevent the preservation of an architecturally or a historically significant part of the building or structure. Facts demonstrating that the above selected statement is true: 1). The campground does not have public water utilities, adding additional cost, nor does that area of the property have phone service for monitoring the system. Storage and maintenance of approximately 1800 gallons of water storage per building also creates undue hardship for the scope of the project.					
3). The percentage of cost to protect property is high compared to the cost of the building (1:3). In light of the lack of typical risk factors, this creates an undue hardship on the camp. The additional cost of sprinkler system cannot be recouped without prohibitive fee increases which will unnecessarily prevent poorer children from using the facilities. These facilities have a year-round occupancy rate of approximately 30% which limits the non-profit camp's ability to economically recoup the added cost to the structure.					
10. STATEMENT OF ACCURACY					
I hereby certify under penalty of perjury that the information of	contained in this application is accurate.				
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)			
Signature of design professiona (// applicable)	Philip R. Zimmerly Please print name	2 - 13-18 Date of signature (month, day, year)			
No K Day DA	J. David Julian, R.A.	1-31 - 18			
11. STATEMENT OF AWARENESS (If the application is submitt					
I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.					
Signature of applicant	Please print name	Date of signature (month, day, year)			
- / / W	Jon Beight	12-1-18			

T. DECORPTION OF DECUESTED VARIANCE		1000 1000		
7. DESCRIPTION OF REQUESTED VARIANCE Name of code or standard and edition involved	Specific code section			
Indiana Building Code (675 IAC 13-2.6-1)	Section 903.2.8 (Int'l Building Co	de (2012 ed.))		
Nature of non-compliance (Include a description of spaces, equipment, etc. Inv. Applicant requests that it be relieved from requirement to instaplan, the cabin at issue is to primarily consist of one small slet two separate exits per room. There are no long flights of stairs not have a kitchen, and is used as a sleeping quarter only. Sr any fire. Additionally, a one-hour fire rated assembly of 3/4" g drywall under the floor joists is to be provided between the tw 2013 (Project No. 362553) (Variance No. 13-04-15) under the application.	olved as necessary.) all sprinkler system for a Group R occupancy eping room (900 sq. ft) per level, with immed s or hallways to have immediate egress of th noke detectors will be installed and will give of ypcrete is to be installed on top of the subfloo o floors. Applicant received a variance for an ese conditions, a true and accurate copy of w	r. Per the attached design late access to the outside via e building. This facility does earlier and sufficient notice of or and a layer of 5/8" Type X identical cabin on May 24,		
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WE	ELFARE WILL BE PROTECTED	11000 11000 1100		
Select one of the following statements:				
Non-compliance with the rule will not be adverse to the public he				
Applicant will undertake alternative actions in lieu of compliance public health, safety, or welfare. Explain why alternative actions	with the rule to ensure that granting of the variance would be adequate (be specific).	e will not be adverse to		
Facts demonstrating that the above selected statement is true: As referenced above, applicant received a variance for an ide 15). Per the attached design plan, this building has primarily of the outside via two separate exits on each level. There are no egress of the building. According to the CDC website, most vi 2001). The required smoke detectors will give earlier and suff smoking is the leading cause of fire-related deaths, and the c cause of residential fires (Ahrens 2011). These facilities do no the occupants of this building fall outside the populations mos and that these summer cabins fall outside the greatest risks f 2010), Alcohol use (Smith 1999)), public health and safety with	one small sleeping room (900 sq. ft) per level o long flights of stairs or hallways to contend ictims of fires die from smoke or toxic gases ficient notice of a fire due to the easy exits many namp is a smoke free facility (Ahrens 2011). Lot have kitchens, and are sleeping quarters of the stat risk (children 4 and under and older adultations (no smoke alarms (Ahrens 2011), wind	I, with immediate access to with to have immediate and not from burns (Hall entioned above. Further, astly, cooking is the primary only. Taking into account that lits [CDC 2010, Flynn 2010]),		
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY	Y SIGNIFICANT STRUCTURE			
Select at least one of the following statements:				
Imposition of the rule would result in an undue hardship (unusual				
Imposition of the rule would result in an undue hardship (unusual				
Imposition of the rule would result in an undue hardship (unusual	difficulty) because of excessive costs of additional of	or altered construction elements.		
Imposition of the rule would prevent the preservation of an archite	ecturally or a historically significant part of the buildin	g or structure.		
Facts demonstrating that the above selected statement is true: 1). The campground does not have public water utilities, addit for monitoring the system. Storage and maintenance of appropare hardship for the scope of the project. 3). The percentage of cost to protect property is high compared.	oximately 1800 gallons of water storage per bed to the cost of the building (1:3). In light of	the lack of typical risk factors,		
this creates an undue hardship on the camp. The additional cincreases which will unnecessarily prevent poorer children fro approximately 30% which limits the non-profit camp's ability t	om using the facilities. These facilities have a	year-round occupancy rate of		
10. STATEMENT OF ACCURACY				
I hereby certify under penalty of perjury that the information of	contained in this application is accurate.			
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)		
INIAM	Philip R. Zimmerly	2-18-18 Data of algorithms (month, day, year)		
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)		
* 11. STATEMENT OF AWARENESS (If the application is submitted)	J. David Julian, R.A.	t sign the following statement		
I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.				
Signature of applicant	Please print name	Date of signature (month, day, year)		
*	Jon Beight			





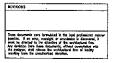




aray Arry Car

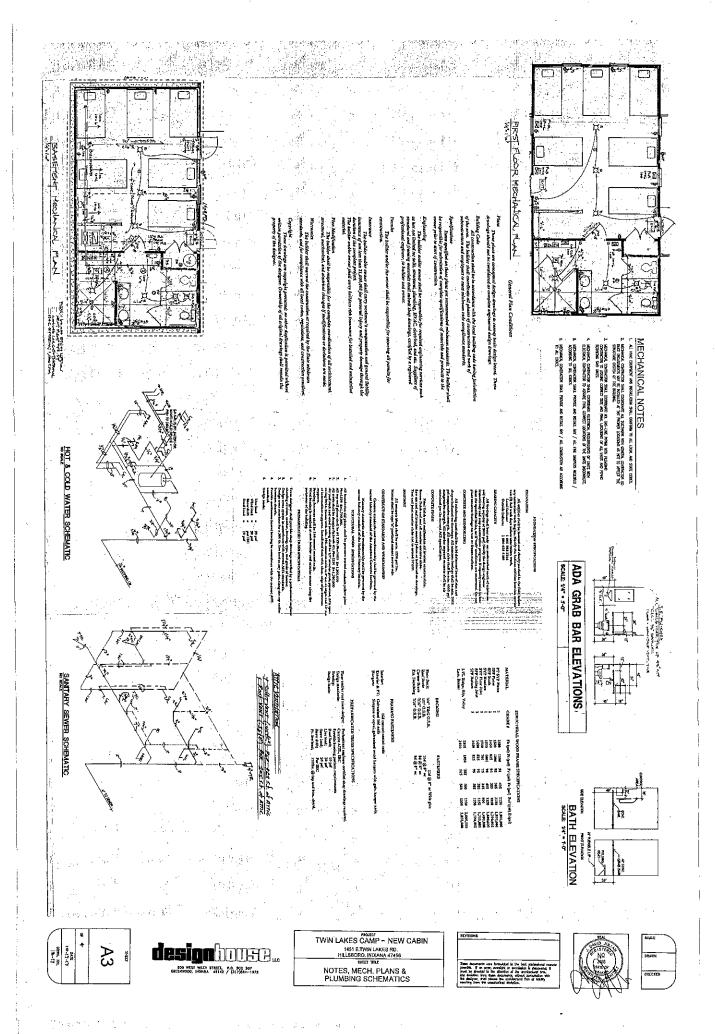
designiouse... 600 WEST WILEY STREET, P.O. BOX 367 GREENWOOD, BOXANA 48142 / (317)881-1072

TWIN LAKES CAMP - NEW CABIN
1401 ETWN LAKES RO.
HILLSBORO, INCHANA 74368
BASEMENT ARCH. & ELEC, PLAN
& WALL SECTIONS











BRYAN J. LANGLEY, EXECUTIVE DIRECTOR

Indiana Department of Homeland Security Indiana Government Center South 302 West Washington Street Indianapolis, IN 46204 317-232-3980

May 24, 2013

JON BEIGHT INDIANA REGULAR BAPTIST YOUTH CAMP INC 14551 E TWIN LAKES RD

HILLSBORO, IN 47949

Dear JON BEIGHT,

This letter provides notice below of the action taken by the Fire Prevention and Building Safety Commission on your application(s) for a variance(s) from the Commission's rules under IC 22-13-2-11 and 675 IAC 12-5. The Commission considered the application with all alternatives offered, as a part of its published agenda, at its regular meeting on May 8, 2013.

Project Number	Project Name	Variance Number
362553	IN REGULAR BAPTIST YOUTH CAMP INC OAK CABIN	13-04-15

Commission Conditions

Edition Code	Code Section	Commission Action & Date	
IN BC (675 IAC 13-2.5)	903.2.7	Approved with 05/08/2013 Commission condition(s)	

You are advised that if you desire an administrative review of this action, you must file a written petition for review at the above address with the Fire Prevention and Building Safety Commission. Your petition must fully identify the matter for which you seek review no later than eighteen(18) calender days from the above stated date of this letter, unless such date is a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours; in which case the deadline would be the first day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Department of Homeland Security's offices are closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge appointed by the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this action will be final.

Please be further advised that you may request an opportunity to informally discuss this matter prior to filing a petition for review. Such informal discussion, or request therefore, does not extend the deadline for filing a petition for review and, therefore, any request for an informal discussion should be made promptly, preferably by telephone or e-mail, upon receipt of this letter.

Sincerely,

Craig E. Burgess

Indiana State Building Commissioner, Department of Homeland Security

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing Application for Variance has been served upon the following local fire official by fax and by first class, United States mail, postage prepaid, this 13th day of February, 2018:

Brian Harshbarger Hillsboro Volunteer Fire Department PO Box 126 Hillsboro, IN 47949 Fax: 765-798-5285

I further certify that a copy of the foregoing Application for Variance has been served upon the following local building official by email and by first class, United States mail, postage prepaid, this 13th day of February, 2018:

Thomas Shoaff 302 W. Washington Street Rm. E241 Indianapolis, IN 46204 tshoaff@dhs.in.gov

Philip R. Zimmerly

3358526_3

Sutor, Beth

From:

Shoaff, Tom

Sent:

Thursday, February 15, 2018 2:25 PM

To:

Clouse, Chris Sutor, Beth

Cc: Subject:

Re: Variance

Beth and Chris,

This was emailed to me direct and I acknowledged receipt back to the sender.

Thomas A. Shoaff | Senior Code Official-Code Enforcement Division of Fire & Building Safety Indiana Department of Homeland Security

302 W. Washington Street, Room E241

Indianapolis, IN 46204 Cell: 317-417-3713

Email: tshoaff@dhs.in.gov Web: www.in.gov/dhs

On Feb 15, 2018, at 2:18 PM, Clouse, Chris < cclouse@dhs.IN.gov> wrote:

Tom this came for you. Please let Beth Sutor know you got this. Thanks.

Christine Clouse / Secretary 3
Fire and Building Code Enforcement
302 W Washington Street, Rm E241
Indianapolis, IN 46204
Phone 317-232-2393
Questions 317-232-1407
Fax 317-233-0307

Email: cclouse@dhs.in.gov

Web: www.in.gov

<Variance for Twin Lakes Camp Elm Cabin Hillsboro Fountain Co Shoaff.pdf>



ATTORNEYS AT LAW

Philip R. Zimmerly

Direct Dial: (317) 684-5116 Fax: (317) 223-0116 E-Mail: PZimmerly@boselaw.com

February 13, 2018

Indiana Department of Homeland Security Code Services Section ATTN: Beth Sutor 302 West Washington Street, Room W246 Indianapolis, IN 46204-2739

Re:

Application for Variance

Dear Ms. Sutor:

Enclosed please find an Application for Variance on behalf of Indiana Regular Baptist Youth Camp, Inc. ("Twin Lakes Camp"), as well as our client's check in the amount of \$276 made payable to the Indiana Department of Homeland Security in payment of the filing fee in this matter.

Please feel free to contact me if you have any questions or comments regarding this Application.

Sincerely,

Philip R. Zimmerly

PRZ/jkb Enclosures

cc:

Jon Beight (w/enclosures)